

FREQUENTLY ASKED QUESTION # 3: HOW WILL MY MEDICAL BILLS GET PAID?



1. **FILE YOUR CLAIM.** [See FAQ #2.](#)
2. **SELECT YOUR ATTENDING PHYSICIAN.**
 - You have the initial choice of your attending physician. Your attending physician may refer you to other physicians. The Office of Workers' Compensation Programs (OWCP) must authorize any change in your attending physician. Failure to obtain such authorization could negatively impact your entitlement to benefits.
3. **ENSURE YOUR PHYSICIAN IS CONSIDERED "QUALIFIED" AND IS ENROLLED WITH THE DEPARTMENT OF LABOR (DOL).** The "Health Care Provider Memo" that is included with your instructional packet provides additional guidance to your physician(s). Your physician(s) will submit your medical bills to the DOL.
4. **BENEFIT ENTITLEMENT:** Once your injury or illness has been accepted as being causally related to factors of your employment, medical services will be authorized. There is no limit on the amount of medical expenses or length of time for which they are paid, as long as the charges represent the "reasonable and customary fees" for the services involved and the need for the treatment is shown. *The only exception to this will be those medical expenses covered through the authorization of a CA-16, Medical Authorization for Treatment.*

KEY POINTS:

- **PHYSICIANS:** The term "physician" includes surgeons, osteopathic practitioners, podiatrists, dentists, clinical psychologists, optometrists and chiropractors within the scope of their practice as defined by State law. If the physician selected has been excluded from participating in the Compensation Program the OWCP District Office will advise you of the exclusion and the need to select another physician.
- **CHIROPRACTORS:** Payment for chiropractic services is limited to treatment consisting of manual manipulation of the spine to correct a subluxation as demonstrated by x-ray to exist.
- **PRE-AUTHORIZATION OF MEDICAL SERVICES:** Once your physician is enrolled as a health care provider with the DOL, he/she will have access to information outlining those services requiring pre-authorization from OWCP. Examples of treatment that require preauthorization include physical therapy, durable goods equipment, and non-emergency surgery. [See FAQ #10.](#)
- **INCIDENTAL OUT OF POCKET MEDICAL EXPENSES:** You may be eligible for reimbursement for out-of-pocket expenses. Contact your ARC WC Specialist for details.
- **TIME LIMITATION ON PAYMENT OF BILLS:** Bills must be submitted to the Department of Labor within one year of the end of the calendar year in which the bill was incurred.

**Questions? Call the ARC WC Specialist at (304) 480-8229
or email questions to WorkersComp@bpd.treas.gov**